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| **Assistance Requesting:** **Primary** **Community Lifeline Utilized:**FMA (Flood Mitigation Assistance) BRIC (Building Resilient and Infrastructure Communities)  Safety and Security  Energy (power grid, fuel) HMGP (Hazard Mitigation Grant Program)  Food, Water, Shelter  Communications  **** Health and Medical TransportationIf HMGP: FEMA-DR-#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Hazardous Material (HAZMAT)  **Community Information: Community NFIP/CRS Status:**  Conforms to State Mitigation Plan NFIP Participating  In Good Standing  Conforms to Local Mitigation Plan  Non-Participating  CRS Community State or Local Government  Private Non-Profit CRS Community Score: \_\_\_\_\_\_\_ Project Pre-Identified in Local Plan  Declared County (HMGP only)  **Building Codes: Warning and Communication Project Type:**   Adopted the building codes consistent with the international codes? Warning Signs Weather Radios Year of Building Code: \_\_\_\_\_\_\_\_\_\_\_\_ Outdoor Warning Siren Building Code Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Building codes been assessed on the Building  Code Effectiveness Grading Schedule? BCEGS Score: \_\_\_\_\_\_\_\_\_  **For state use only:**Date Pre-Application Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  State Reviewer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_ |

This worksheet is for all Hazard Mitigation Grant Program (HMGP) warning and communication proposals. Please complete ALL sections and provide the documents requested. If you require technical assistance with this worksheet, please contact the Hazard Mitigation Division at (404)-635-7522 or 1-800-TRY-GEMA to have a Hazard Mitigation Program Specialist assigned to you.

1. Applicant Information
	* 1. Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Applicant Type

 State Government Local Government Private Non-Profit

3. Worksheet Prepared by:

 Ms. Mr. Mrs. First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (City, State, Zip): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Authorized Applicant Agent (**An individual authorized to sign financial and legal documents on behalf on the local government (e.g., the Chairperson, Board of County Commissioners or the County Manager, etc.).

Ms. Mr. Mrs. First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (City, State, Zip): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted: \_\_\_\_\_\_\_\_\_**

1. Project Information/Mitigation Plan
2. Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Project Summary: (Describe in detail what you are proposing to do.)
4. **Date of Hazard Mitigation Plan approval by FEMA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This project must be identified in your Hazard Mitigation Plan. Provide a copy of the goal, objective, and action step that supports your project application. Please attach a letter of endorsement for the project from your County’s Emergency Management Agency (EMA) Director

1. **History of Hazards / Damages in the Area to be Protected\***

Provide a detailed history of damages in your community for your specific mitigation action. You can use the following web site for details if you do not have them available.

https://www.ncdc.noaa.gov/cdo-web/

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| --- | --- | --- | --- |
| **Date** | **Description of Event** | **Direct Damages** | **Indirect Damages** *(describe)* |
| 10/7/89 | Spring floods of 1985 | Total of $95,000 in damages to 16 homes in project area | Emergency Services – evacuation of 58 people |

**D. Hazards to be Mitigated / Level of Protection**

1. Select the type of hazards the proposed project will mitigate:

[ ]  Flood [ ]  Wind [ ]  Seismic [ ]  Tornado [ ]  Other (list) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Provide the number of people in the project area that will receive a benefit from the proposed project. Include all structures in project area:

 \_\_\_\_\_\_\_\_\_\_ Residential property

 \_\_\_\_\_\_\_\_\_\_ Businesses / Commercial property

 \_\_\_\_\_\_\_\_\_\_ Public buildings

 \_\_\_\_\_\_\_\_\_\_ Schools / Hospitals / Houses of Worship

1. Useful life: The project will provide protection against the hazard(s) above for \_\_\_\_\_\_\_\_\_years.

1. Protection Provided: Describe, in detail, the existing problem. Explain how the proposed project will solve the problem and provide the level of protection.

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**E. Project Location**

1. Name and physical address (including city, state, county and zip code).

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 Digital Latitude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Digital Longitude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Year Built: \_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Flood Insurance Rate Map (FIRM) showing Project Site**

Include copy FIRM map.

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* VE
* AE
* AO or AH
* A (no base flood elevation given)
* B or X (shaded)
* C or X (unshaded)
* Coastal Barrier Resource Act (CBRA) Zone
1. **City or County Map with Project Site and Photographs**
* Include Google map with the project site clearly marked.
* Include color photographs showing a front view, a side view, a back view and a street view of the structure.
1. **For sirens (only)**
* Include color (jpg. Files) photographs showing a north view, east view, south view, west view and street view with a location of each siren.
* Include a Google map with the physical location of the siren clearly marked.

**Existing Warning Capability** (What is your community’s current system to provide severe weather warning and alerts to the public?)

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**F. Project Narrative**

* 1. **Warning Capability Improvement**
		1. Explain how the proposed project will provide the level(s) of protection desired.
		2. Describe the relationship between this project and the community’s storm ready program.
		3. Who will manage the system once operational?

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* 1. **Public Awareness Campaign**
		1. Explain how you will educate the public on the new warning system features (length of campaign, who is involved, media utilized, etc.).
		2. Explain how you will encourage people to participate with the new system.

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* 1. **Planned Exercise Component**
		1. Explain how first responders will be trained on the new system’s features.
		2. Include type of exercise, timeline of when the exercises will happen and summary of who will be involved.

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* 1. **Project Implementation**
		1. Detail what activities will be performed to complete this project.
		2. Include who will perform the activities needed to complete this project.

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* 1. **Project Cost (**List all anticipated project costs. Consider the potential future date of construction when compiling the cost estimate)

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| **Item Description** | **Unit** | **Quantity** | **Unit Price** | **Amount** | **Source** |
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**Total Cost:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_